

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Miller et al.
Filed : Herewith
Title : CHEMILUMINESCENT COMPOUNDS AND USE THEREOF

Docket No. : A-1514div
Customer No. : 33197

EXPRESS MAIL MAILING LABEL NO. **EV204258229US**

Date of Deposit: March 22, 2004

I hereby certify that the following documents as identified below are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under CFR 1.10 on the date indicated above and are addressed to the Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450:

- 1 Application Transmittal Form;
- 2 Application Data Sheet;
- 3 Preliminary Amendment;
- 4 Copy of parent Specification 20 pages;
- 5 Copy of recorded parent Assignment;
- 6 Copy of parent Declaration and Power of Attorney;
- 7 Information Disclosure Statement;
- 8 PTO1449 -- 3 sheets; and
- 9 Return Receipt postcard.

Each of the 9 above-identified documents are enclosed herewith.

Respectfully submitted,

Diane Rasmusson

Diane Rasmusson
Stout, Uxa, Buyan & Mullins, LLP
4 Venture, Suite 300
Irvine, CA 92618

Telephone 949/ 450-1750
Facsimile 949/ 450-1764

- ☒ Information Disclosure Statement/PTO-1449 ☐ Copies of ___ IDS Cited Reference(s)
☒ Preliminary Amendment
☒ Acknowledgment postcard
☐ Application is entitled to Small Entity Status.
☒ Application Data Sheet
☐ Request of NON-PUBLICATION of Application
☒ Certificate of Mailing by Express Mail
☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)

Fee Calculation and Transmittal

**The filing fee is calculated on the basis of the claims existing in the prior application as amended by the accompanying preliminary amendment noted above.*

CLAIMS AS FILED					
For	#Filed	#Allowed	#Extra	Rate	Fee
Total Claims	14	- 20 =	0	X \$ 18.00	\$ 0.00
Independent Claims	3	- 3 =	0	X \$ 86.00	\$ 0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$ 0.00
BASIC FEE					\$ 770.00
SUBTOTAL					\$ 770.00
(Application is entitled to small entity status under 37 CFR 1.9 and 1.27) adjusted small entity status claim fees [rate ÷ 2] SMALL ENTITY STATUS					
OTHER FEE (specify purpose)					\$.00
TOTAL FILING FEE					\$770.00

☐ A check in the amount of \$ _____ to cover the filing fee and the assignment recordation fee is enclosed.

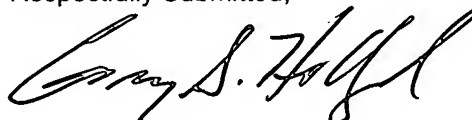
☒ The Commissioner is hereby authorized to charge and/or credit Deposit Account Number 13-5135 as described below.

☒ Charge the amount of \$ 770.00 as filing fee.

☒ Credit any overpayment.

☒ Charge any additional filing fees required under 37 CFR 1.16 and 1.17.

Respectfully Submitted,



Greg S. Holrigel
 Registration Number: 45,374
 Customer Number: 33197

Date: _March 22, 2004
 4 Venture, Suite 300
 phone (949) 450-1750
 fax (949) 450-1764